ALLOWANCE HOT LIST

Appl Exan	l. No. niner-	11/73(, 5°90 Prepared by Date B/29°04
JAC	KET:	:
YES YES	NO NO	Primary Examiner box complete. Issuing Classification complete.
PTO-	- 892/ 1	1449:
YES YES	NO NO	Examiner's initials or cross-through lines supplied for each item cited by applicant. Date(s) supplied/complete on all PTO-1449/892 sheets. (Month and year required.)
SPEC YES XES	C: NO NO	
CLAI	MS:	
YES YES		Claims listed on Notice of Allowability match allowed claims and/or index of claims correctly numbered in index. (No duplicate or missing claim numbers.) (No incorrect dependencies.)
CRFE YES	E: NO	If necessary (biological sequence listing).
NOTI	CE O	F ALLOWABILITY:
XES	NO ·	Either Box No. 3 (drawings accepted) or Box No. (corrected drawing request) has been checked.